## 2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000009671

Entity Name: PERKINS FUND DEVELOPMENT & DISTRIBUTION LLC

**FILED** Mar 04, 2024 **Secretary of State** 9199353235CC

## **Current Principal Place of Business:**

1001 N US HIGHWAY 1 SUITE 204 JUPITER, FL 33477

## **Current Mailing Address:**

1001 N US HIGHWAY 1 SUITE 204 JUPITER, FL 33477 US

FEI Number: 84-2813567 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PERKINS, GILMAN C 1001 N US HIGHWAY 1 SUITE 204 JUPITER, FL 33477 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

City-State-Zip:

City-State-Zip:

Title

Date Electronic Signature of Registered Agent

Title

Authorized Person(s) Detail:

Title **MGRM** Title **MBR** 

PERKINS, GILMAN C PERKINS, SAMUEL G Name Name 1001 N US HIGHWAY 1 1001 N US HIGHWAY 1 Address Address

SUITE 204 SUITE 204

City-State-Zip: JUPITER FL 33477 City-State-Zip: JUPITER FL 33477

Title **MBR** Title MBR

Name PERKINS, LUCIA Name CHAMPAGNE, LINDA Address 1001 N US HIGHWAY 1 Address 1001 N US HIGHWAY 1

> SUITE 204 SUITE 204

JUPITER FL 33477 City-State-Zip: JUPITER FL 33477

**AUTHORIZED MEMBER AUTHORIZED MEMBER** 

HENDERLITE, STEPHEN DORSSEY, ROBERT LANDON Name Name

1001 N US HIGHWAY 1 1001 N US HIGHWAY 1 Address Address

SUITE 204 SUITE 204

JUPITER FL 33477 City-State-Zip: JUPITER FL 33477

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.